



# Coquille Indian Housing Authority

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2678 Mexeye Loop • Coos Bay, OR 97420



## Indian Housing Plan

for the fiscal year ending

**SEPTEMBER 30, 2016**

For Recipient's Use:

## INDIAN HOUSING PLAN/ANNUAL PERFORMANCE REPORT (NAHASDA §§ 102(b)(1)(A) and 404(a)(2))

This form meets the requirements for an Indian Housing Plan (IHP) and Annual Performance Report (APR) required by the United States Department of Housing and Urban Development. In addition to these requirements, a tribe or tribally designated housing entity (TDHE) may elect to prepare a more comprehensive IHP. If a tribe or TDHE elects to prepare a more comprehensive IHP, the required elements of this IHP must still be submitted on the prescribed HUD form. The information requested does not lend itself to confidentiality.

Regulatory and statutory citations are provided throughout this form as applicable. Recipients are encouraged to review these citations when completing the IHP and APR sections of the form.

Under the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA) (25 U.S.C. 4101 et seq.), HUD will provide grants, loan guarantees, and technical assistance to Indian tribes and Alaska Native villages for the development and operation of low income housing in Indian areas. Grants will be made to eligible recipients under the Indian Housing Block Grant (IHBG) program. To be eligible for the grants, recipients must submit an IHP that meets the requirements of the Act. The recipient is required to submit the IHP to HUD at least 75 days prior to the start of its 12-month program year (NAHASDA § 102(a)(1)). The APR is due no later than 90 days after the end of the recipient's program year (24 CFR § 1000.514).

The IHP and the APR (previously two separate forms) are now combined into one form. The sections pertaining to the IHP are submitted **before** the beginning of the 12-month program year, leaving the APR (shaded) sections blank. If the IHP has been updated or amended, use the most recent version when preparing the APR. After the 12-month program year, enter the results from the 12-month program year in the shaded sections of the form to complete the APR. More details on how to complete the IHP and APR sections of the form can be found in the body of this form. In addition, a separate IHP and APR report form guidance is available.

**FORM COMPLETION OPTIONS:** The IHP/APR form may be completed either in hard copy or electronically. Hard copy versions may be completed either by hand or typewriter. Alternatively, the form may be completed electronically as it is a Word document. It is recommended that the form be completed electronically because it is more efficient to complete, submit, and review the form. Furthermore, electronic versions of the form may be submitted to HUD as an email attachment. To document official signatures on the electronic version, you should sign a hard copy of the pages and either fax that signed page or email it as an attachment to your Area Office of Native American Programs. The sections of the IHP that require an official signature are Sections 1 and 8, and Sections 15 and 16, if applicable. For the APR, Section 1 requires an official signature.

Public reporting burden for the collection of information is estimated to average 62 hours, 25 hours for the IHP and 37 hours for the APR. This includes the time for collecting, reviewing, and reporting the data. The IHP data is used to verify that planned activities are eligible, expenditures are reasonable, and recipient certifies compliance with related requirements. The APR data is used to audit the program accurately and monitor recipient progress in completing approved activities, including reported expenditures, outputs, and outcomes. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

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**SECTION 1: COVER PAGE**

- (1) **Grant Number:** 55IH4102770
- (2) **Recipient Program Year:** 10/01/2015 - 09/30/2016
- (3) **Federal Fiscal Year:** 10/01/2015 - 09/30/2016
- (4)  **Initial Plan** (Complete this Section then proceed to Section 2)
- (5)  **Amended Plan** (Complete this Section, Section 8 if applicable, and Section 16)
- (6)  **Annual Performance Report** (Complete items 27-30 and proceed to Section 3)
- (7)  **Tribe**
- (8)  **TDHE**

(9) <b>Name of Recipient:</b> Coquille Indian Housing Authority		
(10) <b>Contact Person:</b> Anne F. Cook, Executive Director		
(11) <b>Telephone Number with Area Code:</b> (541) 888-6501		
(12) <b>Mailing Address:</b> 2678 Mexeye Loop		
(13) <b>City:</b> Coos Bay	(14) <b>State:</b> Oregon	(15) <b>Zip Code:</b> 97420
(16) <b>Fax Number with Area Code (if available):</b> (541) 888-8266		
(17) <b>Email Address (if available):</b> annecook@coquilleiha.org		
(18) <b>If TDHE, List Tribes Below:</b> <div style="margin-left: 20px;">                     Coquille Indian Tribe                      3050 Tremont Street                      North Bend, OR 97459                       Telephone number: (541) 756-0904                      Fax number: (541) 756-0847                 </div>		

**Indian Housing Block Grant (IHBG)****U.S. Department of Housing  
and Urban Development**OMB Approval Number 2577-0218  
(exp. 03/31/16)**IHP/APR**Office of Public and Indian Housing  
Office of Native American Programs

<b>(19) Tax Identification Number:</b> 93-1133051
<b>(20) DUNS Number:</b> 944212935
<b>(21) CCR/SAM Expiration Date:</b> 01/13/2016
<b>(22) IHBG Fiscal Year Formula Amount:</b> \$1,060,053 (FFY 2016 preliminary)
<b>(23) Name of Authorized IHP Submitter:</b> Anne F. Cook
<b>(24) Title of Authorized IHP Submitter:</b> Executive Director
<b>(25) Signature of Authorized IHP Submitter:</b> <i>Anne F. Cook</i>
<b>(26) IHP Submission Date:</b> 07/14/15
<b>(27) Name of Authorized APR Submitter:</b>
<b>(28) Title of Authorized APR Submitter:</b>
<b>(29) Signature of Authorized APR Submitter:</b>
<b>(30) APR Submission Date:</b>

**Certification:** The information contained in this document is accurate and reflects the activities actually planned or accomplished during the program year. Activities planned and accomplished are eligible under applicable statutes and regulations.

**Warning:** If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosure of information, including intentional disclosure, is subject to a civil money penalty not to exceed \$10,000 for each violation.



- (3) **Planned Program Benefits** *(Describe below how your planned programs and activities will address the needs of low income families identified above. Also describe how your planned programs will meet the needs for the various types of housing assistance. NAHASDA § 102(b)(2)(B):*

CIHA owns and operates 65 affordable housing units on Coquille Tribal Lands including 53 rentals, 1 emergency housing unit, and 11 homebuyer units. Low Rent program participants are transitioned to the Home Grant and Occupancy (HomeGO) homebuyer program as they become qualified. In addition, the Monthly Housing Assistance Payments (MHAP) program offers 50 tenant-based rental assistance slots to low income Coquille and other Native American and Alaska Native households throughout the Tribe's five-county service area.

Awareness and utilization of the Section 184 Indian Housing Loan Guarantee Program is promoted regularly at Tribal events. Application to the program is facilitated for qualified low income Coquille and other Native American and Alaska Native families within the Tribe's five-county service area, as well as access to Individual Development Accounts, homebuyer education, credit counseling, and other services.

- (4) **Geographic Distribution** *(Describe below how the assistance will be distributed throughout the geographic area and how this geographic distribution is consistent with the needs of low income families. NAHASDA § 102(b)(2)(B)(i):*

CIHA provides services within the Coquille Indian Tribe's five-county service area which includes Coos, Curry, Douglas, Jackson, and Lane Counties. The distribution of assistance fluctuates but generally mirrors the distribution of the Tribal population within the service area. The majority of CIHA's services are concentrated on Coquille Tribal Lands in Coos County.

## **SECTION 3: PROGRAM DESCRIPTIONS**

### **Planning and Reporting Program Year Activities**

For the IHP, the purpose of this section is to describe each program that will be operating during the 12-month program year. Each program must include the eligible activity, its planned outputs, intended outcome, who will be assisted, and types and levels of assistance. Each of the eligible activities has a specific, measurable output. The first column in the table below lists all eligible activities, the second column identifies the output measure for each eligible activity, and the third column identifies when to consider an output as completed for each eligible activity. Copy and paste text boxes 1.1 through 1.10 as often as needed so that all of your planned programs are included. For the APR, the purpose of this section is to describe your accomplishments, actual outputs, actual outcomes, and any reasons for delays.

**Eligible Activity May Include** *(citations below all reference sections in NAHASDA):*

<b>Eligible Activity</b>	<b>Output Measure</b>	<b>Output Completion</b>
(1) Modernization of 1937 Act Housing [202(1)]	Units	All work completed and unit passed final inspection
(2) Operation of 1937 Act Housing [202(1)]	Units	Number of units in inventory at Program Year End (PYE)
(3) Acquisition of Rental Housing [202(2)]	Units	When recipient takes title to the unit
(4) Construction of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(5) Rehabilitation of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(6) Acquisition of Land for Rental Housing Development [202(2)]	Acres	When recipient takes title to the land
(7) Development of Emergency Shelters [202(2)]	Households	Number of households served at any one time, based on capacity of the shelter
(8) Conversion of Other Structures to Affordable Housing [202(2)]	Units	All work completed and unit passed final inspection
(9) Other Rental Housing Development [202(2)]	Units	All work completed and unit passed final inspection
(10) Acquisition of Land for Homebuyer Unit Development [202(2)]	Acres	When recipient takes title to the land
(11) New Construction of Homebuyer Units [202(2)]	Units	All work completed and unit passed final inspection
(12) Acquisition of Homebuyer Units [202(2)]	Units	When recipient takes title to the unit
(13) Down Payment/Closing Cost Assistance [202(2)]	Units	When binding commitment signed
(14) Lending Subsidies for Homebuyers (Loan) [202(2)]	Units	When binding commitment signed
(15) Other Homebuyer Assistance Activities [202(2)]	Units	When binding commitment signed

(16) Rehabilitation Assistance to Existing Homeowners [202(2)]	Units	All work completed and unit passed final inspection
(17) Tenant Based Rental Assistance [202(3)]	Households	Count each household once per year
(18) Other Housing Services [202(3)]	Households	Count each household once per year
(19) Housing Management Services [202(4)]	Households	Count each household once per year
(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]	Units	Number of units in inventory at PYE
(21) Crime Prevention and Safety [202(5)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(22) Model Activities [202(6)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(23) Self-Determination Program [231-235]		
Acquisition	Units	When recipient takes title to the unit
Construction	Units	All work completed and unit passed final inspection
Rehabilitation	Units	All work completed and unit passed final inspection
Infrastructure	Dollars	Dollars spent (report in Uses of Funding Table only)
(24) Infrastructure to Support Housing [202(2)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(25) Reserve Accounts [202(9)]	N/A	N/A

**Outcome May Include:**

(1) Reduce over-crowding	(7) Create new affordable rental units
(2) Assist renters to become homeowners	(8) Assist affordable housing for college students
(3) Improve quality of substandard units	(9) Provide accessibility for disabled/elderly persons
(4) Improve quality of existing infrastructure	(10) Improve energy efficiency
(5) Address homelessness	(11) Reduction in crime reports
(6) Assist affordable housing for low income households	(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR)

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>1.1. Program Name and Unique Identifier:</b> <b>Accessibility Modifications to 1937 Housing Act Units – 1601.1</b></p>
<p><b>1.2. Program Description</b> <i>(This should be the description of the planned program.):</i> This program is designed to: a. Modify rental units to conform with Section 504 accessibility standards for mobility impaired persons.</p>
<p><b>1.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>  (1) Modernization of 1937 Act Housing [202(1)]</p>
<p><b>1.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>  (9) Provide accessibility for elderly/disabled persons</p>
<p><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>

**1.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**1.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Residents of 1937 Housing Act units.

**1.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Work will be performed by Housing Authority staff or contractors at no cost to residents. Level of assistance is estimated to be \$30,000 or less per unit.

**1.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**1.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
1	N/A	N/A			

**1.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>2.1. Program Name and Unique Identifier:</b> <b>Conversion of Rental Units to Homebuyer Units – 1601.2</b></p>
<p><b>2.2. Program Description</b> <i>(This should be the description of the planned program.):</i> This program is designed to: a. Effect transition from rental program to homebuyer program for qualified families upon successful completion of homebuyer education and financial readiness requirements.</p>
<p><b>2.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>  (1) Modernization of 1937 Act Housing [202(1)]</p>
<p><b>2.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>  (2) Assist renters to become homeowners</p>
<p><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>

**2.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**2.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low Rent program participants.

**2.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Upon entry into the HomeGO program, a participant will be allowed to make modest improvements to the unit to be financed as part of the home purchase. Work may be performed by contractors or, if qualified, by the participant. The improvement allowance is calculated to ensure that the participant's monthly payment does not exceed 30% of the family's adjusted income and is capped at \$15,000 per unit.

**2.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**2.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
2	N/A	N/A			

**2.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>3.1. Program Name and Unique Identifier:</b></p> <p style="text-align: center;"><b>Operation and Maintenance of 1937 Housing Act Units – 1602</b></p>
<p><b>3.2. Program Description</b> <i>(This should be the description of the planned program.):</i></p> <p>This program is designed to:</p> <ol style="list-style-type: none"> <li>a. Maintain a 95% occupancy rate in the Low Rent program.</li> <li>b. Perform routine and periodic maintenance as scheduled.</li> <li>c. Perform emergency and non-routine maintenance as necessary.</li> <li>d. Prepare units for re-occupancy in a timely manner.</li> <li>e. Improve the front lawn of one rental unit.</li> <li>f. Maintain and improve common areas and facilities in the housing community.</li> <li>g. Continue use of one unit as an interim maintenance operations and storage facility pending warehouse replacement.</li> </ol>
<p><b>3.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i></p> <p style="padding-left: 40px;">(2) Operation of 1937 Act Housing [202(1)]</p>

**3.4. Intended Outcome Number** *(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):*

(6) Assist affordable housing for low income households

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**3.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**3.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Residents of 1937 Housing Act units.

**3.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Work will be performed by Housing Authority staff or contractors, generally at no cost to residents. Costs to remedy damage or failure to perform required maintenance tasks will be assessed to residents in accordance with policy.

**3.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**3.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
51	N/A	N/A			

**3.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>4.1. Program Name and Unique Identifier:</b> <b>Tenant Based Rental Assistance – 1609.1</b></p>
<p><b>4.2. Program Description</b> <i>(This should be the description of the planned program.):</i> This program is designed to:</p> <ul style="list-style-type: none"> <li>a. Assist eligible low income Native Americans and Alaska Natives to pay rent in private market rental units.</li> <li>b. Maintain a 100% utilization rate.</li> </ul>
<p><b>4.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>  (17) Tenant Based Rental Assistance [202(3)]</p>
<p><b>4.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>  (6) Assist affordable housing for low income households</p>

**Describe Other Intended Outcome** (Only if you selected "Other" above.):

**4.5. Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

**Describe Other Intended Outcome** (Only if you selected "Other" above.):

**4.6. Who Will Be Assisted** (Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):

Low income Native Americans and Alaska Natives.

**4.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

Subsidy will be paid to participant upon receipt of documentation that the full month's rent has been paid to the landlord. The standard subsidy rate will be supplemented if necessary to ensure participant pays no more than 30% of family adjusted income for rent, capped at fair market.

**4.8. APR:** (Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):

**4.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
N/A	50	N/A			

**4.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

**5.1. Program Name and Unique Identifier:**

**Housing Services – 1609.2**

**5.2. Program Description (This should be the description of the planned program.):**

This program is designed to:

- a. Provide materials and instruction in housekeeping practices and living habits that reduce maintenance costs, improve housekeeping, and promote resident safety.
- b. Provide compliance and performance incentives to program participants.
- c. Counsel current and prospective homebuyers on maintenance and financial responsibilities.
- d. Provide support for meetings and activities of the Residents Association.
- e. Maintain partnerships with Tribal and other community social and support services providers and refer applicants and participants as necessary.
- f. Promote and facilitate employment opportunities, financial literacy, emergency preparedness, homebuyer education, participation in Individual Development Account savings programs and other financial assistance programs for first-time homebuyers, access to the Section 184 program, and other programs and services that enhance participant self-sufficiency.
- g. Provide rental space at a reduced rate to Tribal programs and community partners that directly promote the self-sufficiency of program participants.

**5.3. Eligible Activity Number** *(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(18) Other Housing Services [202(3)]

**5.4. Intended Outcome Number** *(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):*

(6) Assist affordable housing for low income households

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**5.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**5.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native American and Alaska Native applicants and housing program participants.

**5.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Services will be provided by Housing Authority staff or other service providers at minimal or no cost to applicants or participants.

**5.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**5.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
N/A	115	N/A			

**5.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>6.1. Program Name and Unique Identifier:</b> <b>Housing Management Services – 1610.1</b></p>
<p><b>6.2. Program Description</b> <i>(This should be the description of the planned program.):</i></p> <p>This program is designed to:</p> <ol style="list-style-type: none"> <li>a. Manage Low Rent, MHAP, Mutual Help, HomeGO, and Section 184 programs.</li> <li>b. Screen applications for assistance to determine program eligibility.</li> <li>c. Maintain a waiting list of qualified low income Indian families and effect placement when assistance becomes available.</li> <li>d. Conduct annual and interim recertifications of family income and composition.</li> <li>e. Inspect rental units at least once per year and homebuyer units at least every three years. Document and monitor correction of deficiencies.</li> <li>f. Implement transitions between programs.</li> </ol>
<p><b>6.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i></p> <p>(19) Housing Management Services [202(4)]</p>

**6.4. Intended Outcome Number** *(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):*

(6) Assist affordable housing for low income households

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**6.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**6.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native American and Alaska Native applicants and housing program participants.

**6.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Work will be performed by Housing Authority staff at no cost to resident.

**6.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**6.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
N/A	115	N/A			

**6.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>7.1. Program Name and Unique Identifier:</b> <b>Operation and Maintenance of NAHASDA Units – 1610.2</b></p>
<p><b>7.2. Program Description</b> <i>(This should be the description of the planned program.):</i>  This program is designed to: a. Operate and maintain NAHASDA rental units.</p>
<p><b>7.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>  (20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]</p>
<p><b>7.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>  (6) Assist affordable housing for low income households</p>
<p><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>

**7.5. Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.):*

**Describe Other Intended Outcome** *(Only if you selected "Other" above.):*

**7.6. Who Will Be Assisted** *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Residents of NAHASDA rental units.

**7.7. Types and Level of Assistance** *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*

Work will be performed by Housing Authority staff or contractors, generally at no cost to residents. Costs to remedy damage or failure to perform required maintenance tasks will be assessed to residents in accordance with policy.

**7.8. APR:** *(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

**7.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
3	N/A	N/A			

**7.10. APR:** If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>8.1. Program Name and Unique Identifier:</b> <b>Crime Prevention and Safety – 1611</b></p>
<p><b>8.2. Program Description</b> <i>(This should be the description of the planned program.):</i></p> <p>This program is designed to:</p> <ol style="list-style-type: none"> <li>a. Continue agreement with Tribal Police to provide services to the low income housing community.</li> <li>b. Provide for security monitoring and electronic surveillance of housing facilities.</li> <li>c. Install informational, directional, and traffic control signage and devices in the housing community.</li> </ol>
<p><b>8.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i></p> <p>(21) Crime Prevention and Safety [202(5)]</p>
<p><b>8.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i></p> <p>(11) Reduction in crime reports</p>

<p><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>
<p><b>8.5. Actual Outcome Number</b> <i>(In the APR identify the actual outcome from the Outcome list.):</i></p>
<p><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>
<p><b>8.6. Who Will Be Assisted</b> <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i></p> <p>Rental and homebuyer program participants.</p>
<p><b>8.7. Types and Level of Assistance</b> <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i></p> <p>Services will be provided by Tribal Police, contractors, or other service providers at no cost to residents.</p>
<p><b>8.8. APR:</b> <i>(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):</i></p>

**8.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
N/A	N/A	N/A			

<p><b>8.10. APR:</b> If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))</p>
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**IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))**

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

**APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

<p><b>9.1. Program Name and Unique Identifier:</b></p> <p style="text-align: center;"><b>Replacement of Projects and Maintenance Operations and Storage Facility – 1612</b></p>
<p><b>9.2. Program Description</b> <i>(This should be the description of the planned program.):</i></p> <p>This program is designed to:</p> <ul style="list-style-type: none"> <li>a. Demolish the deteriorated foam panel factory building presently used as the Authority’s projects and maintenance shop and storage facility.</li> <li>b. Preserve the concrete foundation of the existing building for reuse.</li> <li>c. Construct a new building better-suited to the support of the Authority’s affordable housing activities on the same footprint.</li> </ul>
<p><b>9.3. Eligible Activity Number</b> <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i></p> <p>(22) Model Activities [202(6)]</p>
<p><b>9.4. Intended Outcome Number</b> <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i></p> <p>(6) Assist affordable housing for low income households</p>

<p align="center"><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>
<p><b>9.5. Actual Outcome Number</b> <i>(In the APR identify the actual outcome from the Outcome list.):</i></p>
<p align="center"><b>Describe Other Intended Outcome</b> <i>(Only if you selected "Other" above.):</i></p>
<p><b>9.6. Who Will Be Assisted</b> <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i></p> <p>Rental and homebuyer program participants.</p>
<p><b>9.7. Types and Level of Assistance</b> <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i></p> <p>Work will be performed by Housing Authority staff and contractors at no cost to residents.</p>
<p><b>9.8. APR:</b> <i>(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):</i></p>

**9.9. Planned and Actual Outputs for 12-Month Program Year**

Planned Number of <b>Units</b> to be Completed in Year Under this Program	Planned Number of <b>Households</b> To Be Served in Year Under this Program	Planned Number of <b>Acres</b> To Be Purchased in Year Under this Program	APR: Actual Number of <b>Units</b> Completed in Program Year	APR: Actual Number of <b>Households</b> Served in Program Year	APR: Actual Number of <b>Acres</b> Purchased in Program Year
N/A	N/A	N/A			

<p><b>9.10. APR:</b> If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))</p>
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## SECTION 4: MAINTAINING 1937 ACT UNITS, DEMOLITION, AND DISPOSITION

- (1) **Maintaining 1937 Act Units** (NAHASDA § 102(b)(2)(A)(v)) *(Describe specifically how you will maintain and operate your 1937 Act housing units in order to ensure that these units will remain viable.):*

Maintenance, modernization and rehabilitation, and special projects work is performed by three full-time employees supplemented as needed by temporary staffing or service contractors.

CIHA has a comprehensive ongoing preventative maintenance program to prevent and correct deterioration of its housing units and other facilities. An inspection of each unit is performed at least once per year and more often as warranted. Counseling sessions are conducted to instruct tenants on maintenance, housekeeping, and safety issues at move-in and thereafter as needed.

CIHA staff continues to improve policies and procedures for recruitment, selection, orientation, training, and counseling of residents.

Tribal Police have been involved in serving eviction papers to residents who have damaged their homes. The Tribal Court has issued orders of eviction, where warranted, and has required some tenants who have damaged their homes to make restitution.

- (2) **Demolition and Disposition** (NAHASDA § 102(b)(2)(A)(iv)(I-III)) *(Describe any planned demolition or disposition of 1937 Act housing units. Be certain to include the timetable for any planned demolition or disposition and any other information required by HUD with respect to the demolition or disposition.):*

There is no demolition or disposition planned.

**SECTION 5: BUDGETS**

**(1) Sources of Funding** (NAHASDA § 102(b)(2)(C)(i) and 404(b)) (Complete the **non-shaded** portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month program year. **APR Actual Sources of Funding -- Please complete the shaded portions of the chart below to describe your actual funds received. Only report on funds actually received and under a grant agreement or other binding commitment during the 12-month program year.**)

SOURCE	IHP					APR					
	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A + B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C minus D)	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F + G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H minus I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	250,000	1,060,053	1,310,053	1,310,053	0						
2. IHBG Program Income	0	255,000	255,000	255,000	0						
3. Title VI	0	951,495	951,495	951,495	0						
4. Title VI Program Income											
5. 1937 Act Operating Reserves											
6. Carry Over 1937 Act Funds											
<b>LEVERAGED FUNDS</b>											
7. ICDBG Funds											
8. Other Federal Funds											
9. LIHTC											
10. Non-Federal Funds	45,000	329,979	374,979	332,979	42,000						
<b>TOTAL</b>	<b>295,000</b>	<b>2,596,527</b>	<b>2,891,527</b>	<b>2,849,527</b>	<b>42,000</b>						

**Notes:**

- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). **For the APR, fill in columns F, G, H, I, J, and K (shaded columns).**
- b. Total of Column D should match the total of Column N from the **Uses Table** on the following page.
- c. Total of Column I should match the Total of Column Q from the Uses Table on the following page.**
- d. For the IHP, describe any estimated leverage in Line 4 below (Estimated Sources or Uses of Funding). **For the APR, describe actual leverage in Line 5 below (APR).**

(2) **Uses of Funding** (NAHASDA § 102(b)(2)(C)(ii)) (Note that the budget should not exceed the total funds on hand (Column C) and insert as many rows as needed to include all the programs identified in Section 3. **Actual expenditures in the APR section are for the 12-month program year.**)

PROGRAM NAME (tie to program names in Section 3 above)	Unique Identifier	IHP			APR		
		(L) Prior and current year IHBG (only) funds to be expended in 12-month program year	(M) Total all other funds to be expended in 12-month program year	(N) Total funds to be expended in 12-month program year (L + M)	(O) Total IHBG (only) funds expended in 12-month program year	(P) Total all other funds expended in 12-month program year	(Q) Total funds expended in 12-month program year (O + P)
Accessibility Modifications to 1937 Housing Act Units	1601.1	30,000	0	30,000			
Conversion of Rental Units to Homebuyer Units	1601.2	30,000	0	30,000			
Operation and Maintenance of 1937 Housing Act units	1602	227,042	155,000	382,042			
Tenant Based Rental Assistance	1609.1	157,000	73,000	230,000			
Housing Services	1609.2	15,000	0	15,000			
Housing Management Services	1610.1	229,000	0	229,000			
Operation and Maintenance of NAHASDA Units	1610.2	30,000	0	30,000			
Crime Prevention and Safety	1611	30,000	0	30,000			
Model Activities: Replacement of Projects and Maintenance Operations and Storage Facility	1612	350,000	1,211,474	1,561,474			
Planning and Administration		212,011	0	212,011			
Loan repayment – describe in 4 below		0	100,000	100,000			
<b>TOTAL</b>		1,310,053	1,539,474	2,849,527			

**Notes:**

- a. Total of Column L cannot exceed the IHBG funds from Column C, Row 1 from the Sources Table on the previous page.
- b. Total of Column M cannot exceed the IHBG funds from Column D, Rows 2-10 from the Sources Table on the previous page.
- c. Total of Column O cannot exceed total IHBG funds received in Column H, Row 1 from the Sources table on the previous page.
- d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources Table on the previous page.
- e. Total of Column Q should equal total of Column I of the Sources Table on the previous page.

- (3) **Estimated Sources or Uses of Funding** (NAHASDA § 102(b)(2)(C)). *(Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses Table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan.):*

**1609.1 – Tenant Based Rental Assistance**

Anticipated Tribal contributions in support of CIHA's tenant-based rental assistance program total \$70,000.

**1612 – Replacement of Projects and Maintenance Operations and Storage Facility and Loan Repayment**

Sources of funds during the period include borrowing proceeds in an estimated amount of \$986,495 for construction of a new Projects and Maintenance Operations and Storage Facility, approved as a Model Activity [202(6)] in the Authority's FY 2015 Indian Housing Plan. Allowance has been made for interest-only payments during construction and for principal and interest payments during the remainder of the period. Non-program funds in the amount of \$259,979 have been allocated to the project as well.

- (4) **APR** (NAHASDA § 404(b)) *(Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses Table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):*

SECTION 6: OTHER SUBMISSION ITEMS

(1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) (Identify the useful life of each housing unit to be constructed, acquired, or rehabilitated with IHBG funds in the 12-month period. Exclude Mutual Help units.)

The useful life of the properties is dependent upon the amount of IHBG funds invested in the property per occurrence as shown in the following schedule:

Table with 2 columns: IHBG Funds Invested and Affordability Period. Rows range from up to \$5,000 (6 months) to over \$52,500 (20 years).

(2) Model Housing and Over-Income Activities (NAHASDA § 202(6), 24 CFR § 1000.108) (If you wish to undertake a model housing activity or wish to serve non-low income households during the 12-month program year, those activities may be described here, in the program description section of the 1-year plan, or as a separate submission.):

Work continues on the Model Activity approved in the Authority's FY 2015 Indian Housing Plan, Replacement of Projects and Maintenance Operations and Storage Facility. The project will enable CIHA to carry out its affordable housing activities in a safer, more efficient, and economical manner.

The budget and anticipated sources of funds provided in the FY 2015 IHP remain unchanged. The preliminary project implementation plan has been adjusted to better coincide with funding availability and to coordinate with other activities. The updated schedule follows.

Task List	Schedule																	
	FY 2015									FY 2016								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Assemble development team	█	█																
Site evaluation and mapping	█	█																
Prepare architectural design	█	█	█	█	█	█	█	█	█									
Conduct environmental review	█	█	█	█	█	█	█	█	█									
Relocate operations and storage to temporary facilities																		
◦ Conduct physical inventory																		
◦ Dispose of excess property																		
◦ Procure and situate temporary storage containers																		
◦ Move equipment and supplies																		
Engineering																		
◦ Prepare demolition plan																		
◦ Prepare site grading and layout plan																		
◦ Prepare erosion control plan and details																		
◦ Prepare architectural plan, sections, and details																		
◦ Prepare structural plan and details																		
◦ Prepare final material and product specification information appropriate for competitive bidding and construction																		
◦ Prepare preliminary work schedule																		
◦ Determine construction insurance requirements																		
◦ Prepare bid documents																		
◦ Invitation to bid																		
◦ Bid forms																		
◦ Instruction to bidders																		
◦ General Conditions of the Contract for Construction, Supplemental Conditions and other requirements																		
◦ Prepare final estimate of probable construction costs based on the final bid ready drawings																		
Procure financing																		
Legal review																		
Procure construction services																		
◦ Research and target Section 3, Indian-owned, and locally-owned businesses																		
◦ Solicit bids																		

Task List	Schedule																	
	FY 2015									FY 2016								
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<ul style="list-style-type: none"> <li>◦ Conduct pre-bid conference</li> <li>Obtain liability and builder's risk insurance</li> <li>Prepare and execute contract documents</li> <li>Conduct pre-construction conference</li> <li>Review final work schedule, shop drawings, product submittals, and proposed subcontractors</li> <li>Conduct background checks on contractor and subcontractor employees in accordance with Tribal law</li> <li>Obtain permits</li> <li>Construction                             <ul style="list-style-type: none"> <li>◦ Remove security fencing in work area</li> <li>◦ Demolish existing structure</li> <li>◦ Prepare site</li> <li>◦ Repair and augment existing slab as necessary</li> <li>◦ Framing</li> <li>◦ Roofing</li> <li>◦ Installation of doors and windows</li> <li>◦ Siding</li> <li>◦ Mechanicals</li> <li>◦ Plumbing</li> <li>◦ Electrical</li> <li>◦ HVAC</li> <li>◦ Insulation</li> <li>◦ Drywall</li> <li>◦ Painting</li> <li>◦ Interior trim and other finish work</li> <li>◦ Flooring</li> <li>◦ Other interior features</li> <li>◦ Reinstall security fencing</li> </ul> </li> <li>Monitor and inspect work in progress</li> <li>Respond to contractor requests for information</li> <li>Respond to contractor requests for information</li> <li>Conduct progress meetings</li> <li>Issue progress payments</li> <li>Update property insurance</li> <li>Prepare move in plan</li> </ul>																		

Task List	Schedule																	
	FY 2014			FY 2015						FY 2016								
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Conduct tours and demonstrations Relocate operations and storage from temporary facilities to new structure Ensure all manuals, warranties, and other documentation received Release temporary operations and storage facilities Establish maintenance schedules based on warranty requirements Complete reporting and close out requirements																		

**(3) Tribal and Other Indian Preference (NAHASDA § 201(b)(5), 24 CFR § 1000.120)**

If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

Does the Tribe have a preference policy? Yes  No

If yes, describe the policy.

CIHA's order of preference is to first serve members of the Coquille Indian Tribe, then members of the Confederated Tribes of the Coos, Lower Umpqua, and Siuslaw Indians, then other Native Americans and Alaska Natives. Homebuyer programs on Coquille Tribal Lands are available to Coquille Tribal members only.

**(4) Anticipated Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)**

Do you intend to use more than 20% of your current grant for Planning and Administration?

Yes  No

If yes, describe why the additional funds are needed for Administration. For a recipient administering funds from multiple grant beneficiaries with a mix of grant or expenditure amounts, for each beneficiary state the grant amount or expenditure amount, the cap percentage applied, and the actual dollar amount of the cap.

**(5) Actual Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)**

Did you expend more than 20% of your current grant for Planning and Administration?

Yes  No

If yes, did you receive HUD approval to exceed the 20% cap on Planning and Administration costs?

Yes  No

If you did not receive approval for spending more than 20% of your current grant on planning and administration costs, describe the reason(s) for exceeding the 20% cap. (See Section 6, Line 5 of the Guidance for information on carry-over of unspent planning and administration expenses.)

**(6) Expanded Formula Area – Verification of Substantial Housing Services (24 CFR § 1000.302(3))**

If your Tribe has an expanded formula area, (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the Tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the Tribe have an expanded formula area?

Yes  No  If no, proceed to Section 7.

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year:

<b>Total Expenditures on Affordable Housing Activities for:</b>		
	<b>All AIAN Households</b>	<b>AIAN Households with Incomes 80% or less of Median Income</b>
<b>IHBG funds:</b>		
<b>Funds from other Sources:</b>		

**(7) APR:** For each separate formula area expansion, list the actual amount of IHBG and other funds expended for all AIAN households and for only AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

<b>Total Expenditures on Affordable Housing Activities for:</b>		
	<b>All AIAN Households</b>	<b>AIAN Households with Incomes 80% or less of Median Income</b>

**Indian Housing Block Grant (IHBG)**

**U.S. Department of Housing  
and Urban Development**

OMB Approval Number 2577-0218  
(exp. 03/31/16)

**IHP/APR**

Office of Public and Indian Housing  
Office of Native American Programs

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<b>IHBG funds:</b>		
<b>Funds from other Sources:</b>		

SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE (NAHASDA § 102(b)(2)(D))

By signing the IHP, you certify that you have all required policies and procedures in place in order to operate any planned IHBG programs.

- (1) In accordance with applicable statutes, the recipient certifies that it will comply with title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.

Yes [checked] No [ ]

- (2) To be eligible for minimum funding in accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that there are households within its jurisdiction at or below 80 percent of median income.

Yes [ ] No [ ] Not Applicable [checked]

(3) The following certifications will only apply where applicable based on program activities.

- (a) The recipient will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD.

Yes [checked] No [ ] Not Applicable [ ]

- (b) Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA.

Yes [checked] No [ ] Not Applicable [ ]

- (c) Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA.

Yes [checked] No [ ] Not Applicable [ ] and

- (d) Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA.

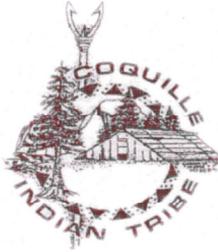
Yes [checked] No [ ] Not Applicable [ ]

SECTION 8: IHP TRIBAL CERTIFICATION (NAHASDA § 102(c))

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP on behalf of a tribe. This certification must be executed by the recognized tribal government covered under the IHP.

- (1) The recognized tribal government of the grant beneficiary certifies that:
(2) [X] It had an opportunity to review the IHP and has authorized the submission of the IHP by the TDHE; or
(3) [ ] It has delegated to such TDHE the authority to submit an IHP and amendments on behalf of the Tribe without prior review by the Tribe.

Table with 2 columns: Field Number and Description, and Value. Rows include Recipient (Coquille Indian Tribe), Authorized Official's Name and Title (Brenda Meade, Chairperson), Authorized Official's Signature (Handwritten signature), and Date (07/09/2015).



# COQUILLE INDIAN TRIBE

3050 Tremont Street North Bend, OR 97459  
Phone: (541) 756-0904 Fax: (541) 756-0847  
www.coquilletribe.org

## RESOLUTION CY1568

### HOUSING: APPROVAL OF FISCAL YEAR 2016 INDIAN HOUSING PLAN FOR SUBMISSION TO THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

**WHEREAS,** the Coquille Indian Tribe is governed by the Coquille Tribal Council pursuant to the Tribal Constitution adopted by eligible voters of the Tribe on August 27, 1991, and approved by the Secretary of the Interior on September 9, 1991; and that the Tribal Council is empowered to act for the Coquille Indian Tribe; AND

**WHEREAS,** the Coquille Indian Tribe is a federally recognized Tribe by virtue of the Coquille Restoration Act and is eligible for federal services and benefits including housing and related programs under the Native American Housing Assistance and Self-Determination Act ("NAHASDA"); AND

**WHEREAS,** the Coquille Indian Tribe has established the Coquille Indian Housing Authority as its Tribally-Designated Housing Entity ("TDHE"); AND

**WHEREAS,** the Housing Authority Board of Commissioners and staff have developed an Indian Housing Plan for the Fiscal Year 2016 as required by NAHASDA; AND

**WHEREAS,** the Housing Authority Board of Commissioners has presented the Fiscal Year 2016 Indian Housing Plan attached hereto as Exhibit A to the Coquille Tribal Council for review and approval; NOW

**THEREFORE, BE IT RESOLVED,** that the Tribal Council of the Coquille Indian Tribe hereby approves the Fiscal Year 2016 Indian Housing Plan for submission to the U.S. Department of Housing and Urban Development and requests that it be approved; AND

**BE IT FINALLY RESOLVED,** that the Chairperson of the Tribal Council, or in the absence of the Chairperson the Vice-Chair, is hereby authorized to sign, execute, and negotiate all applications, contracts, agreements, and amendments thereto on behalf of the Tribe.

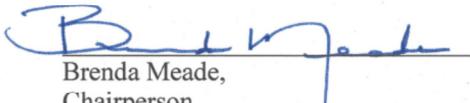
**RESOLUTION CY1568**

Housing: Approval of Fiscal Year 2016 Indian Housing Plan for Submission to the  
U.S. Department of Housing and Urban Development  
Page 2

**CERTIFICATION**

The foregoing Resolution was duly adopted at the Tribal Council Meeting held on the  
Coquille Indian Tribe Reservation in North Bend, Oregon on July 9, 2015, with the  
required quorum present by a vote of

6 For; 0 Against; 0 Absent; 0 Abstaining.

  
Brenda Meade,  
Chairperson

  
Joan Metcalf,  
Secretary-Treasurer

**SECTION 9: TRIBAL WAGE RATE CERTIFICATION**  
(NAHASDA §§ 102(b)(2)(D)(vi) and 104(b))

By signing the IHP, you certify whether you will use tribally determined wages, Davis-Bacon wages, or HUD determined wages. Check only the applicable box below.

- (1)  You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.
  
- (2)  You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance.
  
- (3)  You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities listed below.

(4) List the activities using tribally determined wage rates:
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**SECTION 10: SELF-MONITORING**

(NAHASDA § 403(b), 24 CFR § 1000.502)

(1) Do you have a procedure and/or policy for self-monitoring, including monitoring sub-recipients?

Yes  No

(2) Pursuant to 24 CFR § 1000.502 (b) where the recipient is a TDHE, the grant beneficiary (Indian Tribe) is responsible for monitoring programmatic compliance. Did the Tribe monitor the TDHE?

Yes  No  Not Applicable

(3) Did you complete an annual compliance assessment?

Yes  No

(4) **Self-Monitoring Results** *(Describe the results of the monitoring activities, including inspections for this program year.):*

**SECTION 11: INSPECTIONS**  
NAHASDA § 403(b))

**(1) Inspection of Units** *(Use the table below to record the results of the inspections of assisted housing.)*

Results of Inspections					
(A) Activity	(B) Total number of units (Inventory)	(C) Units in standard condition	(D) Units needing rehabilitation	(E) Units needing to be replaced	(F) Total number of units inspected
1. <b>1937 Housing Act Units:</b>					
a. Rental					
b. Homeownership					
c. Other					
<b>1937 Act Subtotal</b>					
2. <b>NAHASDA Units:</b>					
a. Rental					
b. Homeownership					
c. Rental Assistance					
d. Other					
<b>NAHASDA Subtotal</b>					
<b>Total</b>					

**Note:** Total of column F should equal the sum of columns C+D+E.

**(2)** Did you comply with your inspection policy: Yes  No

**(3) If no, why not:**

**SECTION 12: AUDITS**

24 CFR §§ 1000.544 and 548

This section is used to indicate whether an Office of Management and Budget (OMB) Circular A-133 audit is required, based on a review of your financial records.

Did you expend \$500,000 or more in total Federal awards during the previous fiscal year ended?

Yes  No

If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse and your Area Office of Native American Programs.

If No, an audit is not required.

**SECTION 13: PUBLIC AVAILABILITY**

NAHASDA § 408, 24 CFR § 1000.518

**(1)** Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518)?

Yes  No

**(2)** If you are a TDHE, did you submit this APR to the Tribe (24 CFR § 1000.512)?

Yes  No  Not Applicable

**(3)** If you answered "No" to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.

**(4)** Summarize any comments received from the Tribe and/or the citizens (NAHASDA § 404(d)):

**SECTION 14: JOBS SUPPORTED BY NAHASDA**  
(NAHASDA § 403(b))

Use the table below to record the number of jobs supported with IHBG funds each year.

<b>Indian Housing Block Grant Assistance (IHBG)</b>	
<b>(1)</b> Number of <b>Permanent</b> Jobs Supported	
<b>(2)</b> Number of <b>Temporary</b> Jobs Supported	
<b>(3)</b> Narrative ( <i>optional</i> ):	

*Striving for excellence  
and the embodiment of Coquille Tribal Values  
in all that we do.*



**Coquille Indian Housing Authority**  
2678 Mexeye Loop Coos Bay, OR 97420  
(541) 888-6501 [www.coquilleiha.org](http://www.coquilleiha.org)

